PTO/SB/01 (12-97)
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Attorney Docket Number DECLARATION FOR UTILITY OR Lung-Sheng Tai First Named Inventor **DESIGN** PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number Filing Date ☑ Declaration ☐ Declaration Submitted Submitted after Initial Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing Examiner Name required)

As a below named inver	ntor, I hereby declare that:				
	·				
My residence, post office	address, and citizenship are	e as stated below next to my	name.		
I believe I am the original, names are listed below) o	first and sole inventor (if only the subject matter which is	ily one name is listed below) s claimed and for which a par	or an original, fi tent is sought or	rst and joint inver	ntor (if plural titled:
DUAL BAND	ANTENNA FOR	WIRELESS COM	1MUNICAT	NOI	
the specification of which	<u> </u>	tle of the Invention)			_
is attached hereto	·		••		
OR Was filed on (MM/D	ומאאאטור	as Unite	d States Applica	ion Number or F	PCT International
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Application Number	and w	was amended on (MM/DD/Y)	YY) [(if applicable).
I hereby state that I have re	eviewed and understand the ent specifically referred to ab	contents of the above ident	ified specificatio	n, including the c	:laims, as
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Tacknowledge the duty to t	JISCIOSE INTORMATION WHICH IS	s material to patentapility as	defined in 37 Cr	·H 1.56.	
certificate, or 365(a) of any America, listed below and ha	PCT international application and international application are also identified below, by	. 119(a)-(d) or 365(b) of an ion which designated at leas checking the box, any foreic te before that of the applicat	st one country on application for	other than the U	Inited States of
Prior Foreign Application Number(s)	Country	Foreign Filling Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co YES	py Attached?
92113410	Taiwan	May/16/03			(S)
72113410	Talwan	May/10/03			
		a supplemental priority data			éto:
		ny United States provisional	application(s) lis	ited below.	
Application Number	(s) Filing Dat	te (MM/DD/YYYY)			
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[Page 1 of 2]
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DECLA	RATION -	- Utility	or [esign	Pate	nt A	pp	licatio	on	
I hereby claim the benefit United States of America United States or PCT Inti information which is mal- and the national or PCT is										
U.S. Parent Application or PCT Parent Number			1				Parent Patent Number (if applicable)			
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Additional U.S. or Po	CT international applica									atent
As a named inventor, I he and Trademark Office cor	nected therewith:	Customer Numb	per 25	859			- Sal	Place Custo Number Bar	mer	
	·	OR Registered prac	titioner(s) n	ame/registration	ın number lis	ted below	. L	Lahelhe		_
Name		Registi Num	ration		Nam	e			stration mber	
	practitioner(s) named o	1	Registered	Practitioner In	formation she	eet PTO/S	8/02C	attached here	eto.	
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I hereby declare that all believed to be true; and punishable by fine or in application or any patent	l further that these sta aprisonment, or both, t									
Name of Sole or F	irst Inventor:			A petitio	n has been	filed for	this u	nsigned inve	entor	
Given Name (first and middle [if anyl) Family Name or Sumame					_					
	Lung-Shen	g		<u> </u>	<u></u>	Tai				
Inventor's Signature	Ta: Lu	nn - 5	heng					Oate	07,	/21/(
Residence: City	Tu-Chen	State		Country	Tai	wan		Cltizenship	Ta	iwan
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Post Office Address										

Additional inventors are being named on the 1_supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Und	(+) Inside this box -> +	Act of 1995	, no perso	Patent ar ons are required	of Tendamoria Orac		h 9/30/98.	OMB 0651-00: OMB 0651-00: OF COMMERC nless it contains
DECLARATION			ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1					
Name of Addition	onal Joint Inventor, If	any:		A petit	ion has been file	d for this u	nsigned i	inventor
Given N	ame (first and middle [if a	ny))			Family Na	me or Sum	ame	
Chi	ia-Ming_					Kuo		
inventor's Signature	Kuo, Chia	- Ming			*		Date	07/21/0
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Post Office Address	1650 Memore	x Dri	ve ·	-				
Post Office Address	-					,		
.City .	Santa Clara	. State	C	A ZIP	95050	Country	U.S.	Ά.
Name of Additio	nal Joint Inventor, if	any:		A petition	on has been filed	d for this un	signed in	ventor
Given Name (first and middle [if any])			Family Name or Sumame					
Zł	nen-Da			Hu	ng			
Inventor's Signature	Hung,	Zhen	- Vo	(Date	07/21
Residence: City	Tu-Chen	State		Country	Taiwa	n cu	lizenshlp	Taiwar
Post Office Address	1650 Memorex Drive							
Post Office Address	}							
City	Santa Clara	State	C	A ZIP	95050	Country	υ.	s.A.
Name of Addition	nal Joint Inventor, if a	ıny:		A petitio	n has been filed	for this uns	signed In	ventor
Given Nar	me (first and middle (if an	yl)			Family Nam	e or Suman	пе	
Inventor's Signature			-, - <u></u>				Date	
Residence: City		State		Country		Citi	zenship	
Post Office Address	1650 Memorex	Drive	3					
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City	Santa Clara	State	CA	ZIP	95050	Country	υ.	S.A.

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